

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.



1. File Number U - <u>5914</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Jason</u> <u>B</u> <u>Engels</u> P.O. Box, Bldg., Room No., if any <u>Suite A</u> Street <u>8875 Greenwell Springs Road</u> City <u>Baton Rouge</u> State <u>Louisiana</u> ZIP Code + 4 <u>70814</u>	4. Name, file number, and address of labor organization. Name <u>Louisiana Carpenters Regional Council</u> Labor Organization File Number <u>540-876</u> P.O. Box, Building and Room Number, if any <u>Suite A</u> Street <u>8875 Greenwell Springs Road</u> City <u>Baton Rouge</u> State <u>Louisiana</u> ZIP Code + 4 <u>70814</u>
5. Position in labor organization. <u>Regional Council Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any). Name <u>N/A</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a. Nature of Interest, Transaction, or Income. <u>N/A</u> 7.b. Amount. <u>\$0</u>
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### Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

8/10/2005

Date

225-927-8876

Telephone Number

Name of Person Filing Jason Engels	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="Carpenters Local 1098 Pension Fund"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="8875 Greenwell Springs Rd."/></p> <p>City <input type="text" value="Baton Rouge"/></p> <p>State <input type="text" value="Louisiana"/> ZIP Code + 4 <input type="text" value="70814"/></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="N/A"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>11.a. Nature of such dealing.</p> <p><input type="text" value="The Union is a co-sponsor of the Pension Fund"/></p> <p>11.b. Approximate dollar value of such dealing. <input type="text" value="\$1,535,720"/></p> <p>12.a. Nature of interest held or income received.</p> <p><input type="text" value="Travel as a Union Trustee to the Fund for educational conference on ERISA: IPS Conference, Hilton Head, SC April 27 - May 1, 2004 Registration fee, travel, hotel and meals"/></p> <p>12.b. Amount. <input type="text" value="\$3,002"/></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name <input type="text" value="N/A"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>14.a. Nature of payment.</p> <p><input type="text" value="N/A"/></p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment. <input type="text" value="\$0"/></p>

Name of Person Filing Jason Engels

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Hancock Bank - Trust Department

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 591

Street

City Baton Rouge

State Louisiana ZIP Code + 4 70821

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Carpenters Local 1098 Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 8875 Greenwell Springs Road

City Baton Rouge

State Louisiana ZIP Code + 4 70814

## 11.a. Nature of such dealing.

Custodian bank for Fund's investments

11.b. Approximate dollar value of such dealing.

\$39,726

## 12.a. Nature of interest held or income received.

Christmas Basket, December 2004

12.b. Amount.

\$100

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File Number U-

## Part B Continuation Page

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## 8. Name and address of Business (including trade name, if any).

Name Dearborn Partners L.L.C.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any Suite 1950

Street 200 West Madison

City Chicago

State Illinois ZIP Code + 4 60606

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Carpenters Local 1098 Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 8875 Greenwell Springs Road

City Baton Rouge

State Louisiana ZIP Code + 4 70814

## 11.a. Nature of such dealing.

Investment Manager to Carpenters Local 1098 Pension Fund

11.b. Approximate dollar value of such dealing. \$25,026

## 12.a. Nature of interest held or income received.

Meal prior to Board Meeting:

1. February 5, 2004

12.b. Amount. \$75

Name of Person Filing Jason Engels

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Shumaker, Loop &amp; Kendrick

Trade Name, if any:

P.O. Box, Bldg., Room No., if any N. Courthouse Square

Street 1000 Jackson Place

City Toledo

State Ohio ZIP Code + 4 43624

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name LA. Carpenters Reg. Council Pension Plan

Trade Name, if any: Pension Services, Inc.

P.O. Box, Bldg., Room No., if any

Street 10054 I-10 Service Road, East

City New Orleans

State Louisiana ZIP Code + 4 70127

## 11.a. Nature of such dealing.

[Fund Counsel] - Louisiana Carpenters Regional  
Council Pension Plan - Health & Welfare -  
Apprenticeship/Training

## 11.b. Approximate dollar value of such dealing.

\$68,259

## 12.a. Nature of interest held or income received.

Meal:

September 28, 2004

## 12.b. Amount.

\$43

## Part B Continuation Page

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## 8. Name and address of Business (including trade name, if any).

Name Investment Performance Services

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 15009

Street

City Savannah

State Georgia

ZIP Code + 4 31416

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Carpenters Local 1098 Pension Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 8875 Greenwell Springs Road

City Baton Rouge

State Louisiana

ZIP Code + 4 70814

## 11.a. Nature of such dealing.

Investment Consultant to Carpenters Local 1098 Pension Fund

## 11.b. Approximate dollar value of such dealing.

\$38,053

## 12.a. Nature of interest held or income received.

Meal associated with Board Meeting:

1. May 13, 2004

## 12.b. Amount.

\$45